COCHISE COUNTY GRANT APPROVAL FORM

Form Initiator: Ken Foster	Date Prepared: Apr 8, 2015					
Point of Contact: Ken Foster	Phone Number 432-9533					
Department: Sheriff						
PRIMARY GRANT						
Primary Grantor: Department of Homeland Security	CFDA: www.CFDA.gov					
Grant Title: Stone Garden						
Grant Term From: April 1, 2015 To: July 31, 2015	Total Award Amount: 189,000					
New Grant: Yes No Grant No.	.: 130412-04					
Amendment No.	:					
Funding No.: If new, Finance will assign a funding number.						
Strategic Plan:	District: Mandated by Law? Yes No					
Number of Positions Funded: Asset(s) Acquired:						
Briefly describe the purpose of the grant.						
The purpose of the Stone Garden grant is to assist the US Border Patrol in combating illegal immigration and drug smuggling; and to capture and prosecute or deter those who engage in these activities from continuing these actions.						
If this is a mandated service, cite the source. If not mandated, cite indications of local customer support for this service.						
This service is is not necessarily a mandate for the Sheriff's Office peace, (ARS11-441) which is a mandated function of the Sheriff's	e. However, part of the duty in working this operation is keep the soffice.					

PRIMARY FUNDING SOURCE:

Funding Year:	2013/Reallocation	Federal Funds 332.100	189,000
		State Funds 336.100	
		County Funds 391.000	
		Other Funds:	
		Total Funds:	
Funding Year:		Federal Funds 332.100	
		State Funds 336.100	
		County Funds 391.000	
		Other Funds:	
		Total Funds:	
Funding Year:		Federal Funds 332.100	
		State Funds 336.100	
		County Funds 391.000	
		Total Revenue:	
Has this amount b	peen budgeted?	⊠ No	
Method of collect	ing funds: Lump Sun	n Quarterly] Draw 🔀 Reimbursement
Is revertment of u	nexpended funds required	at the end of grant period	Yes No
(a) Total A-87 Cos	t Allocation: 35,910	(b) Amo	unt of overhead allowed by grant: 0
County Subsidy (a	a) - (b): 0		
Does Grantor accept indirect costs as an allowable expenditure?			
If yes, dollar amount or percentage allowed:			

Second Grantor:				
Grant Term From: To:				
Secondary Award Amount:				
Grant No.:				
Amendment No.:				
Funding Year:	Federal Funds 332.100			
	State Funds 336.100			
	County Funds 391.000			
	Other Funds:			
Funding Year:	Federal Funds 332.100			
	State Funds 336.100			
	County Funds 391.000			
	Other Funds:			
	Total Revenue:			
Has this amount been budgeted?				
Method of collecting funds:				
Is revertment of unexpended funds required at the end of grant period? Yes No				
(a) Total A-87 Cost Allocation: (b) Amount of overhead allowed by grant:				
County Subsidy (a) - (b):				
Does Grantor accept indirect costs as an allowable expenditure?				
If yes, dollar amount or percentage allowed:				

Is County match required? Yes No	
County Match Source:	
County match dollar amount or percentage:	
Signature: Ker Foster	
Board Approval:	Date
Print For	m
Submit by Email to Finance Please e-mail comp	leted form to Finance Idevore@cochise.az.gov.

NOTE: Once approved by the Board of Supervisors, the department is responsible for sending a copy of the fully executed grant document to the Finance Department